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HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

THE CENTRAL LINEN ROOM

BY HELEN WOOD, R.N.

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Hospital administrators are forced, in these days, to stop to consider in the management of every department whether they are employing those methods which will lead to the greatest efficiency. Machinery of organization must be simplified to the lowest terms, both because it is necessary at present for six men to do the work of ten people, and also because the proceeds of six dollars, a year ago, must today require ten dollars' expenditure for equivalent results.

Of all departments in the housekeeping of a hospital, with the exception of the kitchen and its food problems, no department requires more attention nor presents greater difficulty than the laundry and the method of distributing the linen.

The handling of linen has generally been worked out by one of two methods. By the older method, each ward has its own standard of linen, kept when not in actual use on the shelves of its own individual linen closet. The soiled articles are sent to the laundry daily (and presumably are returned daily), and constant inspection is necessary to keep articles belonging to one ward from being carried to other parts of the hospital. In order to ensure that the standard is kept, the head nurse must have careful and systematic supervision of everything going to and returning from the laundry. With this method we are all more or less familiar, and as a rule the small institutions follow this routine.

The other method is that of the central linen room, which should best be arranged in close proximity to or even as a department of the laundry. To the person in charge comes every morning a requisition from each head nurse for the amount of linen needed for her ward for the day. This requisition should have been inspected and signed by someone in authority, to prevent extravagant or needless orders. All soiled linen may go at definite intervals through the day from the wards to the laundry. By night all linen from the laundry should be clean and in the central linen room ready for the morrow's distribution.

There may be elaborate counting and checking up at each step, from ward to laundry, from laundry to linen room, and again from linen room to ward, but experience has taught that with proper super-

vision the necessary counting when filling the orders for the wards is all that is necessary.

In the construction of the linen room it is necessary that there shall be plenty of shelf space so conveniently arranged that the work may be carried out by the fewest number of people possible. The room must not be too large, else in filling baskets too many steps will be required in collecting the necessary articles. Shelves should be proportioned and labelled most conveniently; that is, spaces for much-used articles as sheets, pillow-cases or towels, at the easiest reach, while the less-used articles, as flannel nightgowns, can be on the higher shelves. A large sorting table in the middle of the room is quite necessary, although torn articles should be sent directly from the laundry to the sewing room, and articles coming in from the laundry should be folded from the ironing board or mangle to fit the space intended for it in the linen room.

A report should be received each day from the laundry in regard to goods held back for repair or for the removal of stains. In this way it will be possible for the one distributing clean laundry to know how to plan for the day's supplies, and to know when new linen must be put from the reserve stock into circulation.

The advantages of this system are many. First of all, the linen is kept in circulation, and articles are not as likely to be allowed to accumulate in ward linen closets as was possible under the older system. For instance, in summer weather when no flannel nightgowns are called for by the wards, they can all be stored together on the higher shelves of the linen room, rather than in smaller lots on every ward, only to be an added burden to the housekeeping cares of the head nurse whose time and energy should be conserved as much as possible for the care of patients and the supervision of students. When linen has become stained, so that it fails to respond to the numerous eradicators and bleaches used, it can be kept at one side and used for special purposes, perhaps for the skin ward where the use of ointments will spoil the appearance of the best linens. The older blankets can be used in wards where there are likely to be untidy patients, or where there are infectious cases whose blankets must be subjected to the ruinous effects of sterilization.

The head nurse who orders daily just enough for the day's needs can more readily teach economy of linen to her nurses than if she had on her shelves a complete equipment for a heavy ward, with enough in reserve to meet any emergency. If, then, this means a smaller requirement for a single ward, it will readily be seen that the larger the hospital, the lower will be the per capita standard of articles required to keep up the supply. It will also be found that the less linen

is kept on hand in the ward linen closet, the less will be either lost or stolen. The central linen room itself is so small that little can disappear from its shelves without the knowledge of the person in charge.

Economy of time is always an important factor in efficiency; and it can be well understood how much is consumed if, in the original sorting of clean linen, it is necessary to find on each article its particular ward stamp and assign it accordingly. By this system the hospital stamp alone is all that is required.

To summarize, the central linen room should save time by obviating the necessity of frequent counting and individual sorting according to ward marks, and also by not requiring the handling of more than the day's supply. The responsibility of ordering will be that of the head nurse who knows the needs, and will not be a stereotype standard worked out on a theory alike for all wards. The linen can be kept in good repair and in even circulation, and the ward need not be burdened with the care of more than is necessary for actual use.

From the point of view of the training of student nurses, a week spent in the laundry and linen room will give an insight behind the scenes of hospital management and housekeeping that will be suggestive and helpful, whether she is to go back to routine duty, to a post as head nurse, or to a more important administrative position.

AN ENTERING WEDGE FOR A CENTRAL SCHOOL IN ROCHESTER

BY ALICE SHEPARD GILMAN, R.N.

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Owing to the scarcity of instructors for the coming year, some connection was found necessary between the schools of nursing in Rochester if the teaching standards were to be maintained. With this in view, a director of instruction was secured who will supervise the teaching in three of the larger hospitals, the Rochester General, the Homeopathic and the Hahnemann. A practical instructor and assistant will be a resident at each school and a uniform course of procedure will be carried out under a central head.

Anatomy and physiology, bacteriology and hygiene will be taught by the director, the laboratory work being done by technicians employed at each institution under the direction of the resident bacteriologist.

An outline has been developed which allows for ten hours' theoretical teaching a week, at each school, by the director.